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PTO/SB/05 (08-00)  
Approved for use through 10/31/2002. OMB 0851-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	02-1757
		First Inventor	Mark Richardson
		Title	Method of Advertising on Golf Balls
		Express Mail Label No.	

 17613 U.S. PTO  
 10/634690  
 08/05/03

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <b>16</b> ] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>2</b> ] 5. Oath or Declaration [Total Pages <b>2</b> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed) b. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
<b>ACCOMPANYING APPLICATION PARTS</b>	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other:	

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner: Group / Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>18. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label					
or <input checked="" type="checkbox"/> Correspondence address below					
Name: Elias C. Borges					
Address: 1 Eva Road, Suite 406					
City: Toronto		State: Ontario		Zip Code: M9C 4Z5	
Country: CANADA		Telephone: 416-622-8718		Fax: 416-622-4130	

Name (Print/Type): Elias C. Borges	Registration No. (Attorney/Agent): 46,424
Signature: <i>Elias C. Borges</i>	Date: Aug 1, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

17236 U.S. PTO  
08/05/03

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL  
for FY 2002**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT (\$)** 465.00**Complete If Known**

Application Number	
Filing Date	
First Named Inventor	Mark Richardson
Examiner Name	
Group Art Unit	
Attorney Docket No.	

**METHOD OF PAYMENT**

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	
Deposit Account Name	

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☒ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☐ Check ☒ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	
101	740	201	370	Utility filing fee	375.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

**SUBTOTAL (1) (\$)** 375.00**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** = 10	9.00	90.00
Independent Claims	-3** =		
Multiple Dependent			

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$)** 465.00

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$)****SUBMITTED BY**Name (Print/Type) **Elias C. Borges**Registration No. **46,424**  
(Attorney/Agent)**Complete (if applicable)**Telephone **416-622-8718**

Signature

Date **08/01/2003****WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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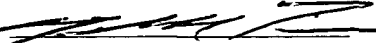
Express Mail Label No.: EU584893431US

Date of Deposit: August 5, 2003

CERTIFICATION OF EXPRESS MAILING UNDER 37 C.F.R. §1.10

I hereby certify that I am depositing the enclosed or attached papers with the U.S. Postal Service "Express Mail Post Office to Addressee" service (postage prepaid) on the above date, addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Mail Stop: Patent Application.

Date: 8/5/03

Signature:   
Rochelle Lieberman

**PATENT**

**Atty Docket No.: 1157-205**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: **Richardson**

SERIAL NO.: **Unknown**

Group Art Unit: **Unknown**

FILING DATE: **August 5, 2003**

Examiner: **Unknown**

FOR: **Method of Advertising on  
Golf Balls**

**Patent Application Transmittal**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Mail Stop: Patent Application

Sir:

Transmitted herewith for filing is the Patent Application of:

Inventor: **Richardson**

Entitled: **Method of Advertising on Golf Balls**

Enclosed are:

- ▶ 16 pages of specifications, claims and abstract
- ▶ 2 sheets of drawings
- ▶ A Declaration and Power of Attorney

- ▶ A Power of Attorney and Authorization of Agent
- ▶ A Fee Transmittal Sheet
- ▶ A Credit Card Payment Form in the amount of \$465
- ▶ A Utility Patent Application Transmittal

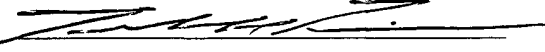
The filing fee has been calculated as follows:

**Small Entity**

For:	No. Filed	No. Extra	Rate	Fee
Basic Fee				\$375.00
Total Claims	30 - 20 =	10	x \$9.00=	\$90.00
Indep. Claims	3 - 3 =	0	x \$78.00=	\$0.00
<input type="checkbox"/> Multiple Dependent Claim Presented			\$260.00	\$0.00
TOTAL				\$465.00

A credit card payment form in the amount of \$465 made payable to “Commissioner of Patents and Trademarks” to cover the filing fee is also enclosed. Please stamp the postcard indicating the serial number assigned to this patent application.

Respectfully submitted,

By: 

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Registration No. 39,276

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Date: August 5, 2003